AIMS COVID-19 POSITIVE TEST REPORT INSTRUCTIONS

EMPLOYER INFORMATION

| Employer Name | Enter the Court name. |
|--------------------------------------|---|
| Number of Employees | This field is optional and not required, and reflects all persons in your employment. |
| Primary Contact, Phone, and Email | Name of the contact person in case there are questions. |
| Fax | If available. |
| Today's Date | Date the form is submitted to AIMS. |

COVID-19 TEST RESULT INFORMATION

| Tracking Number | This is an internal number you assign to each individual submission to track what has been reported. Do not include any Personal Identifiable Information (such as SSN, DOB, etc.) in this report. AIMS needs this number to ensure there are no duplicative submissions. |
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| Reported as Industrial | All test results, industrial or otherwise, need to be reported to AIMS. However, if a claim has been made associated with this positive test, this box should be checked. |
| Date of Positive COVID- 19 Test | This is the sample collection date, i.e. when test was taken. The test must be a Polymerase Chain Reaction (PCR) or other viral testing approved by the FDA. Serologic (antibody) testing is not a viable test. Obtain a copy of the test to verify the test type. If you have questions regarding the test or results, contact your County Department of Public Health for assistance. |
| Date Employer Notified of Positive COVID-19 Test Result | As stated. |
| Date Employee Last Worked before Positive COVID-19 Test Result | As stated. |

Submit Your Report

Email your completed report to COVIDReporting@aims4claims.com and co: jbwcp@jud.ca.gov, or fax it to (916) 563-1919.